

Reference# _____

MAIL-IN

HOUSE BILL SIGNING PHOTO REQUEST

■ House Bill Number: _____

■ Date Photographed: _____

| | |
|-----------|-------------------------------------|
| Qty _____ | 5 X 7 Prints - \$5.00 each |
| Qty _____ | Digital Images - \$5.00 each |
| | (300 DPI Jpeg) |

Name: _____
(Please Print Legibly)

Affiliation: _____

Address or Mail Stop: _____

City and Zip Code

Telephone: ____ (____) _____

E-Mail Address: _____

**Mail Order Form along with Check made out to "House of Representatives"
to Address Below:**

Accounting Office
House of Representatives
John L. O'Brien Building
PO Box 40600
Olympia, WA 98504-0600

■ **Questions Regarding Photos: 360-786-7171**